



Nebraska Corporation Income Tax Return

for the taxable year January 1, 2004 through
December 31, 2004 or other taxable year

FORM 1120N

2004

beginning

, 2004 and ending

PLEASE DO NOT WRITE IN THIS SPACE

Please Type or Print

Name

Street or Other Mailing Address

City or Town

State

Zip Code

☐ Check here if this is a change of name or address.

☐ Check here if you need to receive a printed booklet from the Nebraska Department of Revenue next year.

All Applicable Lines and Questions Must be Completed for the Return to be Processed

Check box if: ☐ Initial Nebraska Return ☐ Cooperative Organization
☐ Final Nebraska Return ☐ Exempt Organization

Principal Business Activity in Nebraska

Date Business Began in Nebraska

Nebraska Identification Number

Federal Identification Number

Business Classification Code (New Codes – See Instr.)

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Corporation Filing Status (Answer questions A through D, as applicable.)

A. Is this a corporation that owns at least 50% of another corporation; or is it owned at least 50% by another corporation?

(1) ☐ YES

(2) ☐ NO

If Yes, attach Federal Form 851 or a schedule of affiliated corporations and federal ID's and answer questions B, C, and D.

B. Is one single Nebraska return being filed for the entire group?

(1) ☐ YES

(2) ☐ NO

C. Are you filing as a unitary group in any other state?

(1) ☐ YES

(2) ☐ NO

D. Check the method used to determine Nebraska income (check only one):

(1) ☐ Combined report of a controlled group of corporations

(2) ☐ Separate report by a member of a controlled group of corporations

(3) ☐ Alternate method (attach Department of Revenue approval)

All corporations required to file must complete this page. Schedules A, I, II, III, and IV must be completed if appropriate. Complete Schedule A, lines 2 and 3, to report any bonus depreciation and enhanced Section 179 expense deduction add-back.

1	Federal gross sales or receipts from attached Federal Form 1120 or 1120A (see instructions)	1		
2	Federal taxable income (see instructions)	2		
3	Federal net operating loss deduction	3		
4	Federal capital loss carryover	4		
5	Other adjustments (enter line 9 from attached Nebr. Schedule A — see instr.)	5		
6	Total adjustments (add lines 3 and 4, plus or minus line 5)	6		
7	Adjusted federal taxable income (line 2 plus or minus line 6)	7		
8	Nebraska taxable income before Nebraska carryovers (see instructions)	8		
9	Nebraska capital loss carryover (see instructions)	9		
10	Line 8 minus line 9	10		
11	Nebraska net operating loss carryover (see instructions — attach worksheet)	11		
12	Net Nebraska taxable income (line 10 minus line 11)	12		
13	Nebraska tax (from tax rate schedule in instructions)	13		
14	Credit for in lieu of intangible tax paid (see instructions — attach schedule)	14		
15	CDAA credit (see page 3 instructions — attach forms)	15		
16	Form 3800N credit (attach Form 3800N)	16		
17	Total nonrefundable credits (total of lines 14, 15, and 16)	17		
18	Subtract line 17 from line 13 (if line 17 is more than line 13, enter zero [0])	18		
19	Form 4136N credit (see page 3 instructions — attach Form 4136N)	19		
20	Tax deposited with Form 7004N	20		
21	2004 estimated tax payments (minus any Form 4466N adjustment)	21		
22	Beginning Farmer credit (attach certificate) <input type="checkbox"/> ; LB 608 credit <input type="checkbox"/>	22		
23	Total payments (total of lines 19, 20, 21, and 22)	23		
24	TAX DUE (line 18 minus line 23) <input type="checkbox"/> Check this box if payment is made by Electronic Funds Transfer (EFT) If over \$400 and Form 2220N is attached, include penalty in line 24 and show here: 99 \$	24		
25	OVERPAYMENT (line 23 minus line 18)	25		
26	Amount on line 25 you want CREDITED to 2005 estimated tax	26		
27	Amount to be REFUNDED (line 25 minus line 26). If \$75,000 or greater, see instructions	27		

Under penalties of perjury, I declare that as taxpayer or preparer I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is correct and complete.

sign
here

Signature of Officer

Date

Signature of Preparer Other than Taxpayer

Date

Title

Daytime Phone Number

Address

Daytime Phone Number

A TRUE COPY OF THE FEDERAL RETURN AND SUPPORTING SCHEDULES MUST BE ATTACHED TO THIS RETURN.
Mail this return and payment to: NEBRASKA DEPARTMENT OF REVENUE, P.O. BOX 94818, LINCOLN, NE 68509-4818

NEBRASKA SCHEDULE A — Summary of Line 5 Adjustments
NEBRASKA SCHEDULE I — Apportionment for Multistate Business
NEBRASKA SCHEDULE II — Foreign Dividend and Special Foreign
Tax Credit Deduction



NEBRASKA SCHEDULE III — Converting Net Income to Combined Net Income

• If you use this schedule, read instructions and attach this page to Form 1120N

FORM
1120N

Name as Shown on Form 1120N

Nebraska Identification Number

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Income and Deductions	Corporation Names (Enter Names Below)			Eliminations (Attach Explanation)	Combined Income
1 Gross receipts or gross sales minus returns and allowances					
2 Minus: Cost of goods sold or operations					
3 Gross profit					
4 Dividends					
5 Interest					
6 Gross rents					
7 Gross royalties					
8 Capital gain net income					
9 Net gain (loss)					
10 Other income					
11 TOTAL INCOME (LOSS) (total of lines 3 through 10)					
12 Compensation of officers					
13 Salaries and wages (minus employment credit)					
14 Repairs and maintenance					
15 Bad debts					
16 Rents					
17 Taxes					
18 Interest					
19 Charitable contributions					
20 Depreciation					
21 a Minus depreciation claimed elsewhere on federal return					
b Net depreciation					
22 Depletion					
23 Advertising					
24 Pension, profit sharing, etc. plans					
25 Employee benefit plans					
26 Other deductions (attach schedules)					
27 TOTAL DEDUCTIONS (total of lines 12 through 19 and 21b through 26)					
28 Taxable income before federal adjustments (line 11 minus line 27)					
29 Minus: a Net operating loss deduction					
b Special deductions					
30 Taxable income (line 28 minus lines 29a and 29b). Enter amount in "Combined Income" column and on line 2, Form 1120N					

* Complete columns A, B, and C if tax payments were made under more than one Nebraska identification number.

** Complete column D to summarize the numerator of the corporations filing one combined corporation income tax return.